



Agency Information & FY2017 Budget Proposal

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January 27, 2016

# Secretariat FY2017 Budget Summary

	FY16 GAA***	FY16 Est. Spending	FY17 H2	H2 vs FY16 Est. Spend	H2 % vs FY16 Est. Spend	H2 vs FY16 GAA	H2 % vs FY16 GAA
EOHHS Admin	293,740,178	286,693,022	306,238,115	19,545,093	7%	12,497,937	4%
<b>EOHHS Reserves</b>	30,000,000	26,345,537	36,245,575	9,900,038	38%	6,245,575	21%
MassHealth Program*	14,682,448,673	14,825,840,294	15,409,253,833	583,413,539	4%	726,805,160	5%
Hospital Payments	651,141,606	1,188,003,844	667,597,334	(520,406,510)	-44%	16,455,728	3%
ELD	283,420,525	284,762,643	286,443,708	1,681,065	1%	3,023,183	1%
DPH**	554,453,843	559,408,055	600,346,061	40,938,006	7%	45,892,218	8%
DMH	740,481,660	743,690,085	761,038,511	17,348,426	2%	20,556,851	3%
DCF**	907,705,914	926,679,138	938,191,906	11,512,768	1%	30,485,992	3%
DTA	690,221,815	681,041,531	672,163,919	(8,877,612)	-1%	(18,057,896)	-3%
DYS	177,165,639	177,071,242	176,606,629	(464,613)	0%	(559,010)	0%
DDS	1,770,141,292	1,766,629,424	1,820,027,382	53,397,959	3%	49,886,090	3%
MRC	49,527,394	49,229,832	49,313,763	83,932	0%	(213,631)	0%
MCB	22,157,471	21,819,356	22,068,810	249,455	1%	(88,661)	0%
MCDHH	5,645,031	5,333,216	5,411,403	78,187	1%	(233,628)	-4%
VET	93,216,260	92,881,944	93,470,430	588,485	1%	254,170	0%
CHE	30,139,153	27,583,968	27,810,690	226,721	1%	(2,328,463)	-8%
HLY	24,479,580	23,419,403	23,902,041	482,638	2%	(577,539)	-2%
ORI	400,000	390,215	400,000	9,785	3%	0	0%
EOHHS All	21,006,086,034	21,686,432,535	21,896,130,111	209,697,576	1%	890,044,077	4%

<sup>\*</sup>includes Hutchinson

<sup>\*\*</sup>FY16 GAA to H2 includes \$24m DV transfer

<sup>\*\*\*</sup>Does not reflect ERIP adjustments

## **Executive Office (EHS)**

#### House 2 (H2) Budget

The H2 budget funds EOHHS Admin and Reserves at \$342.5m, an \$18.7m (+6%) increase above FY16 GAA.

#### **H2 Highlights**

- Includes a \$36.2 Reserve for Chapter 257 and annualization at the agency level for a total of \$50m.
- The Safe and Successful Youth Initiative (SSYI) is funded at \$8.9m supporting the full year cost of this effective program in twelve cities. SSYI employs community-based, violence prevention strategies for high-risk urban youth ages 14-24.
- \$3.5m in Youth/Family Homelessness prevention (\$2m Unaccompanied Homeless Youth, \$1.5m End Family Homelessness Reserve) that will continue FY16's efforts of organizing and creating local network capacity, engaging youth and families "upstream" and providing necessary services and supports.
  - Additionally, \$300k is identified at the Department of Housing and Community
     Development (DHCD) for referrals to the HomeBASE program for families exiting domestic violence and substance misuse.

## MassHealth

#### **Agency Summary**

#### **Mission**

To improve the health outcomes of nearly 1.9 million members by providing access to health care and long term services and supports that promote health, well-being, independence, and quality of life.

#### **Population Served**

MassHealth provides health care to 1.84 million (FY16 avg.), or over 25% of the Commonwealth's residents, to:

- o 788,000 low and moderate income adults (42% of all members)
- o 618,000 low and moderate income children (34% of all members)
- 284,000 people with disabilities and 162,000 seniors (combined, 24% of all members)

#### **Priorities**

- Creating a long term sustainable public insurance program.
- Providing better care through increased enrollment in OneCare, Senior Care Options (SCO), and managed care programs.
- Integrating physical care, behavioral health care and long term services and supports with primary care.
- Enhancing program integrity and efficiency through more effective enrollment management.
- Commencing the restructuring of MassHealth in FY17 as a bridge for renegotiated waiver and development of ACOs for FY18.

## MassHealth

#### House 2 (H2) Budget:

MassHealth programmatic accounts are funded at \$15.409b, an increase of \$726m (5%) compared to FY16 GAA. MassHealth supplemental payments for MATF/DSTI hospitals are funded at \$668m, an increase of \$16M (3%) vs. FY16 GAA.

#### Highlighted H2 Budget Increases:

- Modest growth in community Long-term Services and Supports (LTSS) spending consistent with population growth (\$60m).
- Medicare premium increases required by the Centers for Medicare & Medicaid Services (CMS) (\$90m).
- Nursing facility rate increase (\$30m) supported by a \$15m increase in industry assessment.
- \$22m increase for community support services for persons with acquired brain injury residing in long-term care facilities related to the Hutchinson settlement.
- Maintaining \$20m investment for Infrastructure Capacity Building (ICB) grants.
- 10% increase in Delivery System Transformation Initiatives (DSTI) funding as authorized under 1115 waiver agreement (\$16m).
  - DSTI: Supplemental payments to 7 safety net hospitals under the current 1115 waiver, linked to delivery system improvements (authorized 6 years total, through June 2017).

## MassHealth

#### Highlighted H2 Budget Increases (cont.):

- Managing caseload at historical enrollment growth of 3% (average enrollment of 1.9 million members in FY17) as MassHealth completes fixes and improvements to eligibility systems.
- Ensuring sustainable growth of Long-term Services and Supports (LTSS) spending by enhancing program integrity and strengthening utilization management, for example:
  - Home Health spending grew 40% in one year, primarily driven by an influx of new providers.
  - Moratorium in place effective 2/1/2016 on new home health provider enrollments.
  - Introducing utilization management (e.g., prior authorization) to ensure appropriate utilization on 2/1/2016.
- Leveraging Premium Assistance benefits for individuals with employer-based insurance and for students with Student Health Insurance Plans (SHIP).
- Creation of the Delivery System Reform Trust Fund. Significant up-front federal investments to accelerate the adoption of alternative payment models, available to providers that adopt MassHealth's new Accountable Care Organization (ACO) models.
- Creating annual open-enrollment for MassHealth members.
- Increasing spending for PCA (Personal Care Attendant) services by 10%.
- Holding majority of rates steady for FY17.

## **Elder Affairs (ELD)**

#### **Agency Summary**

The Executive Office of Elder Affairs (ELD) promotes the independence, empowerment, and well-being of older adults, individuals with disabilities, and their caregivers.

#### House 2 (H2) Budget

ELD is funded at \$286.4m in H2, a \$3m (+1%) increase above FY16 GAA.

- Maintains commitment to ongoing enrollment for consumers eligible for the State Home Care.
   Program. This includes projected growth of 2.8% for consumers at a nursing facility level-of-care need.
- Funding to support \$4.9m expansion in Protective Services caseload.
- Supports \$12.8m in core funding for Councils on Aging grants (level funded at \$9 per elder).

## Department of Public Health (DPH)

#### **Agency Summary**

DPH's mission is to successfully advance population health management strategies, interventions, and services within the continuum of care in order to prevent and reduce health disparities, illness, injury, and premature death, to ensure access to high-quality public health and health care services, and to promote wellness and health equity for all people within the Commonwealth. In addition to its state appropriations, DPH manages 120 federal grants, 29 trust fund accounts and 75 interagency service agreements.

#### House 2 (H2) Budget

DPH is funded at \$600.3m in H2, a \$45.9m (+8%) increase above FY16 GAA and \$21.7m (+4%) when adjusting for the \$24m transfer of Domestic Violence (DV) programs from DCF.

#### **H2 Budget Highlights**

- Prioritized funding for opioid prevention, treatment, and recovery efforts, including 2,150 residential recovery treatment beds.
- Receives \$24m from DCF for contracted **Domestic Violence (DV) services** for families to create more consistent public policy and services for survivors of DV.
- Level funds Youth Violence Prevention and Youth-at-Risk Grants to FY16 GAA at \$5.3m.
- Funds the Public Health Hospital System at \$180m, a \$6.6m (+3.7%) increase over FY16 GAA.

## Department of Public Health (DPH)

#### **H2 Budget Highlights (cont.)**

- A \$300k for the creation of an **Office of Population Health** to support, develop, and implement evidence-based, data-driven health policies, programs, and partnerships in line with the Governor's digital health initiatives.
- \$3m to increase regulatory oversight and 20 new inspectors within Environmental Health and Health Care Quality and Safety and system upgrades to the state-wide Prescription Monitoring Program (PMP).
- \$140.6m in total opioid-related spending at DPH, a \$24.07m (+21%) increase above FY16 GAA. This figure includes Chapter 257 rates to strengthen and support residential rehabilitation treatment bed capacity, and also includes:
  - \$14m for Ch.257 rates and \$10m to purchase 80% of the licensed residential recovery service beds across the Commonwealth, increasing the capacity from 2,000 to 2,150.
  - \$5M reinvestment in the substance abuse services fund to expand prevention and treatment services.
  - Services commenced in FY16 including but not limited to:
    - Implementation of new prescription monitoring program.
    - 28 dedicated section 35 treatment beds at Shattuck Hospital.
    - Improved access to Naloxone in the Community.
    - (Up to) 32 Office Based Opioid Treatment Programs.
    - Certification of sober homes
    - 5 Recovery High Schools

## Department of Public Health (DPH)

Opioid services (cont.)

- 19 Community Coalitions
- Massachusetts Substance Abuse Helpline
- 3 Walk in Access Centers.
- Recovery Coaches in Emergency Department pilots
- 20 Learn to Cope Chapters
- A reduction of \$2m from FY16 GAA to DPH account 4513-1012 WIC (Women, Infants, and Children) Program Manufacturer Rebates Retained Revenue. This reduction is due to lower infant formula utilization. There is no negative client impact.

## **Department of Mental Health (DMH)**

#### **Agency Summary**

DMH's mission as the State Mental Health Authority is to assure and provide access to services and supports to meet the mental health needs of adults with severe mental illness and children with serious emotional disturbance enabling them to live, work and participate in their communities. The agency provides community-based and continuing-care inpatient services for approximately 29,000 individuals throughout the state.

#### House 2 (H2) Budget

DMH is funded at \$761m, a \$20.6m (+3%) increase above FY16 GAA.

- \$13m to fund 45 treatment beds at Taunton State Hospital for women who are civilly committed for substance use and co-occuring disorders.15 beds operational in FY16 and 30 more beds in FY17.
- \$1m increase in Adult Community-Based Services to increase adult community-based services and supports in the Southeast region.
- \$1m increase to provide 4 low threshold housing and support Homelessness programs for 34 individuals in: Metro Boston (2), Worcester (1) and Springfield (1).

## Department of Children and Families (DCF)

#### **Agency Summary**

The Department of Children and Families' (DCF) mission is to protect children from abuse and neglect. DCF serves approximately 35,000 children at any given time, primarily children ages 0-18, and youth ages 18-21 who were previously involved with the Department.

#### House 2 (H2) Budget

DCF is funded at \$938.2m in H2, a \$30.5m (+3%) increase above FY16 GAA and a \$54.7m (+6%) when adjusting for the \$24m transfer of Domestic Violence (DV) contracts to DPH.

- \$12m for 281 new hires throughout FY17, including:
  - 236 additional social workers and social worker techs, 22 supervisors, 6 area program managers, and 7 clerical staff. This will support the ongoing commitment to meet a 18:1 caseload standard. In addition, funding will support 5 regional substance abuse coordinators and 5 regional quality assurance coordinators.
- \$5m to fund the annualization of FY16 initiatives (part of recognized DCF deficiency) to decouple area offices, achieve 4:1 ratio of supervisors to area program managers, FTEs to review foster care placements every six months, and domestic violence specialists.
- H2 supports the hiring of over 600 new FTEs since January 2015.

## Department of Children and Families (DCF)

#### H2 Budget Highlights (cont.)

- \$54.7m increase from FY16 GA when accounting for \$24m DV transfer to DPH, as follows:
  - \$30.6m in Staffing Costs (612 FTEs total, including full annualization of 358 social workers and social worker technicians, collective bargaining, and other staffing costs)
  - \$19.8m for Caseload and Services
    - \$9.5m placement caseloads (i.e. Congregate Care)
    - \$6.2m Chapter 257 rates (i.e. Youth Intermediate Stabilization rate)
    - \$2.5m for Family Resource Centers transfer from EOHHS
    - \$1.6m to increase Foster Care rates to 2014 USDA levels (~+2%)
  - \$4.3m for Admin and Operations Support (travel, IT equipment, space leases)
- The H2 budget transfers the responsibility for Domestic Violence (DV) contracts to the Department of Public Health (DPH) to create more consistent and coherent public health strategy for Sexual Assault (SA)/DV.
  - H2 transfers the DCF \$26m DV account (4800-1400) to DPH's DV and Sexual Assault Prevention and Treatment (4513-1130) and the DCF Services for Children and Families account (4800-0038) accounts.
  - The DPH account received \$24m+ of DV shelter contract costs, while the DCF account received \$2m+ for staff and New Chardon shelter costs.
  - This fund transfer is a product of continued agency review and improvement efforts at DCF, with the understanding that the agency's account structure be completely and neatly aligned to its central mission.

## Department of Transitional Assistance (DTA)

#### **Agency Summary**

The mission of the Department of Transitional Assistance (DTA) is to support low-income individuals and families to meet their basic needs, increase their incomes, and improve their quality of life. DTA works with individuals and families throughout the Commonwealth to provide services through a combination of federal and state-funded programs with the ultimate goal of achieving fiscal stability for all our clients. DTA serves one out of every nine people in the Commonwealth.

#### House 2 (H2) Budget

DTA is funded at \$672.2m in H2, an \$18m (-3%) decrease below FY16 GAA.

#### **H2 Budget Highlights**

- H2 includes a number of new initiatives that stabilize and support the working poor. Fully funding key aspects of the 2014's Welfare Reform law, the H2 budget:
  - Expands access to employment support services by fully-funding Pathways to Self-Sufficiency at \$15m. This program will serve an estimated 3,200 DTA clients.
  - Proposes \$2.6m in new program funding for transportation benefits for SNAP recipients.
  - Provides a transitional TAFDC benefit for clients whose cases closing due to earnings, addressing the "cliff effect" that could result in them cycling back onto cash assistance.
  - Funds a pilot Employment Services Program for non-custodial parents of TAFDC children.

## Department of Transitional Assistance (DTA)

#### **H2 Budget Highlights (cont.)**

- Includes \$3.8m in new funding for nearly 100 new caseworkers, employment specialists, and domestic violence (DV) workers, to engage clients in education and training that will lead to employment, ensure program integrity, a new MassHealth/SNAP Combined Application Project that will increase the number of people in the Commonwealth receiving nutritional support under SNAP, and address the needs of DV survivors.
- Invests \$8m in new funding for childcare benefits at Early Education and Care (EEC) for DTA clients, including a provision of childcare for those extended family members-aunts, uncles, and grandparents who step-in for parents unable to care for children, many of whom would otherwise end up in state-funded foster care.
- H2 also simplifies state regulations and increases incentives to work to promote long-term economic self-sufficiency among benefit recipients.
- H2 includes SSI (Supplemental Security Income) when determining TAFDC eligibility and benefit amounts. This proposal would create equity among other benefits including veterans' benefits, RSDI (SSI for individuals who have paid into the system), and unemployment assistance, and is aligned with the income eligibility requirements of the federal Supplemental Nutrition Assistance Program (SNAP).

# Department of Youth Services (DYS)

#### **Agency Summary**

The Department of Youth Services ("DYS") is the Massachusetts juvenile justice agency charged with providing a comprehensive and coordinated program of delinquency prevention and services to youth detained or committed to DYS by the courts. DYS' mission is to make communities safer by improving life outcomes for youth in care through investment in highly qualified staff and a service continuum that engages youth, families and communities in strategies that support positive youth development.

In Calendar Year 2015, DYS had 2,238 detention admissions, 460 commitments, and 1,989 overnight arrest admissions (placement for youth arrested overnight or during the weekend until arraignment or court date). DYS served 2,496 committed and detained youth. Approximately 170 youth on any given day are held on bail at DYS facilities awaiting their next court appearance

#### House 2 (H2) Budget

DYS is funded at \$176.6m in H2, a \$559k (<1%) decrease below FY16 GAA.

#### **H2 Budget Highlights**

- Relocating three (3) secure treatment programs to a new state of the art facility in Middleton that will improve living conditions for the 45 youth in the programs and bring them closer to home.
- Consolidating the existing Dorchester girls' residential treatment program into the new Westboro facility.

## Department of Youth Services (DYS)

#### **H2 Budget Highlights (cont.)**

- Enhancing the service continuum to effectively and better serve an older population of youth who have been redirected to DYS as a result of the "Raise the Age" legislation in 2013.
- Continuing to invest in Education and Career Readiness to provide our youth the best chance to succeed post discharge from DYS.
- Continuing to support the Juvenile Detention Alternatives Initiative (JDAI) to ensure that "the right youth, is in the right place, for the right reasons".

# Department of Developmental Services (DDS)

#### **Agency Summary**

The Department of Developmental Services (DDS) is dedicated to creating, innovative and genuine opportunities for individuals with intellectual disabilities to participate fully and meaningfully in, and contribute to, their communities as valued members. DDS provides specialized services and supports to more than 36,000 adults and children with intellectual and developmental disabilities including those with Autism. DDS also provides residential services to individuals with acquired brain injury. DDS provides these services through 2 state operated facilities, 287 community-based state operated programs, and by contracting with more than 200 private provider agencies.

#### House 2 (H2) Budget

DDS is funded at \$1.820b in H2, a \$49.9m (+3%) increase above FY16 GAA.

- Increases in Respite and Family Supports (5920-3000) by \$6.8m (+11%) from FY16 GAA to fund at \$62.7m in H2.
  - Family Supports \$5m expansion will support at least 3,200 more individuals and families that care for loved ones who are disabled living at home with flexible supports
  - \$1m+ of total increase for Ch.257 rate annualization
- All but two DDS line items have significant increases beyond the FY16 GAA, with three accounts level funded.
- \$1.1m decrease in the DDS Facility account due to declining census.

# Department of Developmental Services (DDS)

#### **H2 Budget Highlights (cont.)**

- Annualized Turning 22 funding of \$37.8m
- Increased utilization of Shared Living services as a preferred residential model for 245 individuals newly eligible for DDS services (from current base of 1,000+), including individuals Turning 22 and/or individuals currently residing in a state or provider operated residence.

## Mass. Rehabilitation Commission (MRC)

#### **Agency Summary**

Massachusetts Rehabilitation Commission (MRC) promotes equality, empowerment and independence of individuals with disabilities. These goals are achieved through enhancing and encouraging personal choice and the right to succeed or fail in the pursuit of independence and employment in the community. MRC provides comprehensive services to people with disabilities that maximize their quality of life and economic self-sufficiency in the community.

#### House 2 (H2) Budget

MRC is funded at \$49.3m in H2, a \$213k (-<1%) decrease below FY16 GAA. These are ERIP (Early Retirement Incentive Program) related reductions as MRC is funded \$83k above FY16 estimated spending.

- MRC estimates being able to serve approximately the same number of consumers in its state programs in FY17 as compared to FY16.
- Ongoing Business Process Redesign efforts and the consolidation of only "back office" functions (i.e. financial management) at MRC, MCB, and MCDHH.
  - These agencies will remain independent agencies

## Mass. Commission for the Blind (MCB)

#### **Agency Summary**

The mission of the Massachusetts Commission for the Blind (MCB) is to provide the highest quality rehabilitation and social services to individuals who are legally blind, leading to independence and full community participation.

#### House 2 (H2) Budget

MCB is funded at \$22.07m in H2, a \$89k (-<1%) decrease below FY16 GAA. These are ERIP (Early Retirement Incentive Program) related reductions as MCB is funded \$250k (+1%) above FY16 estimated spending.

- H2 includes funding for new Turning 22 (4110-2000) consumers who are deaf/blind/multihandicap aging out of Special Education in FY17 and ensures their continuity of care.
- Funding for State Vocational Rehabilitation (4110-3010) are level funded to FY16 GAA.
  - This state "match" component to the federal grant will not be penalized because of the maintained funding level
- Ongoing Business Process Redesign efforts and the consolidation of only "back office" functions (i.e. financial management) at MRC, MCB, and MCDHH.
  - These agencies will remain independent agencies

# Mass. Commission for the Deaf & Hard of Hearing (MCDHH)

#### **Agency Summary**

The Mission of MCDHH is to provide accessible communication, education and advocacy to consumers and private and public entities so that programs, services and opportunities throughout Massachusetts are fully accessible to persons who are Deaf and hard of hearing.

#### House 2 (H2) Budget

MCDHH is funded at \$5.41m in H2, a \$233k (-4%) decrease below FY16 GAA. These are ERIP (Early Retirement Incentive Program) related driven reductions as MCDHH is funded \$78k (+1%) above FY16 estimated spending.

#### **H2 Budget Highlights**

- MCDHH estimates being able to serve approximately the same number of consumers in its state programs in FY17 as compared to FY16.
- Ongoing Business Process Redesign efforts and the consolidation of only "back office" functions (i.e. financial management) at MRC, MCB, and MCDHH.
  - These agencies will remain independent agencies

## Department of Veterans' Services (DVS)

#### **Agency Summary**

The mission of the Department of Veterans' Services (DVS) is to be the primary advocate for the 380,000 veterans and their families in the Commonwealth. DVS administers the needs-based benefits program Chapter 115 (MGL) benefits through the municipal veterans' agents, funds Annuity benefits to Gold Star parents, widows and spouses, provides state funding to organizations offering homelessness services, transitional housing and outreach to veterans, acts as a liaison for those veterans seeking federal assistance through the Veterans' Administration, and operate two veterans' cemeteries.

#### House 2 (H2) Budget

VET is funded at \$93.4m in H2, a \$254k (+<1%) increase above FY16 GAA. This additional funding in the VET Benefits appropriation (1410-0400) will support the Medicare Part B premium increase.

- H2 provides funding to support:
  - Allocated \$2m in funding for homelessness and housing supportive services for veterans and their families
  - Chapter 115 Veteran Benefits for approximately ~12,000 veterans
  - Annuity benefits for ~12,000 Gold Star families, widows, and spouses

## Chelsea Soldiers' Home (CHE)

#### **Agency Summary**

The mission of the Soldiers' Home in Massachusetts (CHE) is to provide the highest quality healthcare and supportive services to Massachusetts Veterans with dignity, honor and respect. CHE provides healthcare and housing to all honorably discharged veterans who meet the statutory eligibility requirements. CHE operates a 174 bed long-term care facility, which includes skilled nursing beds, long-term care beds and dementia units, along with 305 beds in an independent living/domiciliary service.

#### House 2 (H2) Budget

CHE is funded at \$27.8m in H2, a \$2.3m (-8%) decrease below FY16 GAA. These are ERIP (Early Retirement Incentive Program) driven reductions as CHE is funded \$227k (+1%) above FY16 estimated spending.

#### **H2 Budget Highlights**

- Funding to operate the Home assumes caseload, patient days, and overall volume to be consistent with FY16 levels.
- Budget assumes 331 FTEs for FY17, which is about equal to FY16 levels. Although CHE's 10 year average FTE level is ~357 FTE, unlike HLY the facility has made business process improvements allowing CHE to thoughtfully manage limited resources.

## Holyoke Soldiers' Home (HLY)

#### **Agency Summary**

The mission of the Soldiers' Home in Holyoke (HLY) is to provide care with honor and dignity for Massachusetts Veterans. HLY provides healthcare and housing to all honorably discharged veterans who meet the statutory eligibility requirements. HLY operates a 265 bed long-term care facility, which includes long-term care beds, dementia units, comfort care services along with 30 beds in a domiciliary service.

#### House 2 (H2) Budget

HLY is funded at \$23.9m in H2, a \$578k (-2%) decrease below FY16 GAA. These are ERIP (Early Retirement Incentive Program) driven reductions as HLY is funded \$483k (+2%) above FY16 estimated spending.

#### **H2 Budget Highlights**

- The \$879k (+4%) increase to HLY's Admin and Operation account (4190-0100) will permit the agency to hire additional direct care staff in FY17.
- Budget assumes 338 FTEs for FY17, which is about 15 more FTEs than in FY16. HLY's 10 year average FTE level is ~313 FTE.

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## Office of Refugees and Immigrants (ORI)

#### **Agency Summary**

The Massachusetts Office for refugees and Immigrants (ORI) is primarily funded through federal grants (Office of Refugee Resettlement (ORR). The agency's primary responsibility is to administer the Massachusetts refugee resettlement program, which includes refugee cash and medical assistance, case management, employment services, English language for employment training, and foster care for unaccompanied minors. ORI also administers a small state funded citizenship assistance program.

#### House 2 (H2) Budget

ORI is funded at \$400k in H2 and level-funded to FY16 GAA.

- Federally funded programs totaling \$19.6m
  - \$10.3m for unaccompanied refugee minors program (URMP)
  - \$2.3m for refugee medical assistance programs
  - \$3.8m for refugee cash assistance and case management
  - \$3.2m for employment and social services

#### **H2 Budget Highlights**

 The state funded program will permit 1,600 low income legal immigrants to receive citizenship assistance in FY17.